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CONFIRMATION NO. 5804

<b>SERIAL NUMBER</b> 10/634,024	<b>FILING OR 371(c) DATE</b> 08/04/2003 <b>RULE</b>	<b>CLASS</b> 347	<b>GROUP ART UNIT</b> 2861	<b>ATTORNEY DOCKET NO.</b> 10971935-17
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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CON of 09/975,295 10/10/2001 PAT 6,619,789 which is a CIP of 09/034,874 03/04/1998 PAT 6,130,695 which is a CIP of 08/785,580 01/21/1997 PAT 5,812,156  
 This application 10/634,024 is a CIP of 08/871,566 06/04/1997 PAT 6,074,042

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 10/31/2003**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>mv</i> Initials	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 16	<b>TOTAL CLAIMS</b> 34 12	<b>INDEPENDENT CLAIMS</b> 6 2
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**ADDRESS**  
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**TITLE**  
 Ink delivery system adapter

<b>FILING FEE RECEIVED</b> 1254	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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